



City of Redmond Supplier Registration Form

Please mail completed form to:
City of Redmond, Attn: Purchasing M/S: CAFIN
PO Box 97010, Redmond, WA 98073-9710
Or fax to: (425) 556-2185

Primary Product(s)/Services(s): _____

SIC Code: _____ **SSN or Federal ID #:** _____

(Standard Industrial Classification REQUIRED look at WWW.OSHA.GOV and use back button to return to registration form if necessary.)

How Long in Business?: _____ years **Dunn & Bradstreet #:** _____

Company Name: _____

Contact: _____ **Phone:** _____ **Fax:** _____

Website: _____ **E-Mail Address:** _____

Correspondence Address:	Remit to Address:	Shipping & Terms
_____	_____	FOB: _____
_____	_____	Terms: _____

Trade References: (please provide company name/contact/phone number)

1. _____
2. _____
3. _____

Names & Titles of Company Owners/Officers: _____

Type of Organization (check one only):

☐ Corporation ☐ Proprietorship ☐ Partnership ☐ Non Profit ☐ Other: _____

Type of Business (check one only):

☐ Manufacturer ☐ Distributor/Wholesaler ☐ Broker ☐ Dealer ☐ Service
☐ Contractor ☐ Consultant ☐ Other (please specify): _____

Name & Title of Person(s) Authorized to Sign Bids: _____

Do you provide any of the following (check all that apply):

☐ Surplus/Resale Products ☐ Hazardous Product Disposal ☐ Recycled products

Do you accept any of the following (check all that apply):

☐ American Express ☐ VISA ☐ Mastercard ☐ Discover ☐ Other: _____

I certify that the above information is correct: _____
(signature) (date)

In addition to submitting this form, find out about online bidding and/or receiving automatic notification of bids on the City of Redmond website at <http://www.ci.redmond.wa.us/insidecityhall/finance/purchasing.asp>.